

# Chinese Language Teacher Recommendation

\* Required

1. Email address \*

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MANDARIN  
INSTITUTE  
中文教学推广中心



## 2020 Mandarin Institute SFUSD STARTALK Middle and High School Chinese Program

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Your student has applied to the Mandarin Institute STARTALK Chinese program. We appreciate you taking the time to tell us about your student so that we can determine if the program is a good fit for him/her.

Please fill in this quick survey and let us know your thoughts so that we can provide your student with a good program that will improve their Chinese language proficiency.

## Teacher Information

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2. Teacher Name \*

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3. Title / Position

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4. School / Organization \*

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5. Phone number

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## Student Information

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6. Student Name \*

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**7. Current School \***

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**8. Grade \***

*Mark only one oval.*

- 5
- 6
- 7
- 8
- Freshman
- Sophomore
- Junior
- Senior

**9. How long have you known this student? \***

*Mark only one oval.*

- Less than 1 year
- 1 year
- 2 years
- 3 years
- 4 + years

**10. What level is this student's Chinese speaking and listening skills? \***

ACTFL Proficiency Choose only one

*Check all that apply.*

- Novice
- Intermediate
- Advanced

**11. How would you rate this student's Chinese speaking and listening skills within this level? \***

ACTFL Proficiency Choose only one

*Check all that apply.*

- Low
- Mid
- High

**12. What level is this student's Chinese reading and writing skills? \***

ACTFL Proficiency Choose only one

*Check all that apply.*

- Novice
- Intermediate
- Advanced

13. How would you rate this student's Chinese reading and writing skills within this level? \*

ACTFL Proficiency Choose only one  
Check all that apply.

- Low
- Mid
- High

14. How motivated is this student to learn Chinese? \*

Mark only one oval.

|          |                       |                       |                       |                       |                       |           |
|----------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
|          | 1                     | 2                     | 3                     | 4                     | 5                     |           |
| Not very | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | Very much |

15. Is s/he a strong student academically? \*

Mark only one oval.

|          |                       |                       |                       |                       |                       |           |
|----------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
|          | 1                     | 2                     | 3                     | 4                     | 5                     |           |
| Not very | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | Very much |

16. Does this student work well in groups? \*

Mark only one oval.

|          |                       |                       |                       |                       |                       |           |
|----------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
|          | 1                     | 2                     | 3                     | 4                     | 5                     |           |
| Not very | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | Very well |

17. Does this student behave well in class? \*

Mark only one oval.

|          |                       |                       |                       |                       |                       |           |
|----------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
|          | 1                     | 2                     | 3                     | 4                     | 5                     |           |
| Not very | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | Very well |

18. What would you want our teachers to know about this student?

\_\_\_\_\_

19. Is this student a strong candidate to participate in an intensive Mandarin program? \*

Mark only one oval.

- Yes
- No

XIE XIE  
谢谢！  
THANK YOU!

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